

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AK</i>	<i>7531</i>	<i>4/7</i>
O.I.P.E. CLASSIFIER	<i>2-1</i>	<i>7533</i>	<i>10/15/0</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
—	(Through numeral) Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Final	Original	Date
1	✓	✓	2/10
2	✓	✓	2/10
3	✓	✓	2/10
4	✓	✓	2/10
5	✓	✓	2/10
6	✓	✓	2/10
7	✓	✓	2/10
8	✓	✓	2/10
9	✓	✓	2/10
10	✓	✓	2/10
11	✓	✓	2/10
12	✓	✓	2/10
13	✓	✓	2/10
14	✓	✓	2/10
15	✓	✓	2/10
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25	✓	✓	2/10
26	✓	✓	2/10
27	✓	✓	2/10
28	✓	✓	2/10
29	✓	✓	2/10
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48	✓	✓	2/10
49	✓	✓	2/10
50	✓	✓	2/10

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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